Effective January 1, 2003 /0/60/327												
CLAIMS AS FILED - PART I (Column 1) (Column								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS							Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	BASIC FEE \$375		OR	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS			minus 20=		*		Γ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		1	OTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1)		(СоІип		(Column 3)	s	SMALL ENTITY			SMALL	ENTITY
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		2		X\$ 9=		OR	X\$18≂	
AME	Independent	*	Minus	***	CLAIM	-		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	+280=	
	•							TOTAL DIT. FEE	<u> </u>	OR	TOTAL ADDIT, FEE	
		(Column 1)	(Colun	umn 2) (Column 3)			DII. FEE			ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.37	Minus	<b>43</b>	2	=	,	<b>(\$ 9=</b>		OR	X\$18=	
	Independent	NTATION OF MI	Minus	ENIDENIT	Z	=		K42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	140=		OR	+280=	
							AD!	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
2-8-07 (Column 1) (Column 2) (Column 3)								)(1. FGE (			ADDII. PEEL	
AMENDMENT C	e e e e esta	CLAIMS REMAINING AFTER AMENDMENT	Market Co.	HIGHE NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI-/ TIONAL FRE
	Total	. 33	Minus	<u>~3</u>		- Q	,	<b>(\$ 9=</b>		OR	X\$18=	X
	Independent	* /	Minus	see 7	01.444	<u>- ()</u>		(42=	-	OR	X84=/	
ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=			+280=	7
•	the entry in colu	_	TOTAL		OR	TOTAL	<u>A</u>					
***	f the "Highest Nu	mber Previously Pa mber Previously Pa iber Previously Pai	ild For IN THI	S SPACE is	less that	n 3. enter "3."	700	IT. FEE	propriate box		ADDIT. FEE	

**Application or Docket Number**